

Form CPF M 102: Campaign Finance Report

Municipal Form Office of Campaign and Political Finance ELECTIONS OMMISSION

File v	vith:						
City	or Town	Clark	Of	Election	Comm	12210	Off

Please print or type all information, except signatures.							
Fill in dates:	Month	Dute	Year		Month 00	KTONE M	Year
Reporting Period Beginning_	10	18	2013	Ending	12	31	2013

Type of report: (Check one) ☐8th day preceding preliminary ☐8th day preceding election ☐30 day after election

TIMOTHY J. CRUISE

Full Name of Candidate (if applicable)

BROCKTON CITY COUNCIL - WARD ONE

Office Sought and District

12 BASSETT RO. BROCKTOW, MA 02301

Residential Address

Tel. No. (optional)

	7C-3	(Committe	e Name	
JEI	AN E.	MO	RRISON	3	
	N	ame o	f Commi	ttee Tre	asurer
			20 000000000000000000000000000000000000		
12			20 000000000000000000000000000000000000		NA 02301
12	BASSE	ETT RE	20 000000000000000000000000000000000000	C(C7010)	MA 02301

SUMMARY BALANCE INFORMATION	:NC
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Line 1: Ending balance from previous report 8841.46 275.00

Line 2: Total receipts this period (page 2, line 11) 9716,46 Line 3: Subtotal (line 1 plus line 2)

5578.63 Line 4: Total expenditures this period (page 3, line 14)

4137,83 Line 5: Ending balance (line 3 minus line 4)

Line 6: Total in-kind contributions this period (page 4) -0-

Line 7: Total (all) outstanding liabilities (page 4)

Line 8: Name of bank(s) used ROCKLAND TRUST

Affidavit of Committee Treasurer:

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Treasurer's signature (in ink)

FOR CANDIDATE FILINGS ONLY: (CANDIDATE MUST SIGN BELOW)

Affidavit of Candidate: (check I box only)

Candidate with Committee and no activity independent of the committee

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period.

Candidate without Committee OR Candidate with independent activity filing separate report

I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55.

Signed under the penalties of perjury:



SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Received	Name and Residential Address (alphabetical listing required)	Am	ount	Occupation & Employer (for contributions of \$200 or mor	
16-27-13	ANANIA, VIRGINIA PO BOX 126 S. EASTON, MA 02375	100	00	HOMEMAKER	
10-25-13	BARGER, CRAIG 57 ULD FOUNDRY ST. S.EASTON, MA 023.75	100	00		
10-26-13	BROCKTON FIREHOUTERS PEOPLES COMMITTEE PO BOX 868 BROCKTON, MA 02303	250	00	FIREFIGHTERS	
10-23-13	HEALEY, WILLIAM 180 HEALEY TERRACE BROCKTON, MA 02301	100	00		
10-20-13	PARKER, ANDREW 19 BRIDGE ST. N. EASTON, MA 02356	100	00	±	
11-3-13	RACHIUS, EDWARD 863 CRESCENT ST. BROCKTON, MA 01302	200	00	EXECUTIVE) MUTUAL OIL	
16-20-13	SIEBEL, ANN 19 ROCKLAND ST. BROCKTON, MA 02301	25	00	•	
		-			
3					
Line 9: T	otal receipts in excess of \$50 (or listed above)	875	00		
	otal receipts \$50 and under* (not listed above)			, Å,	
Line 11: T	OTAL RECEIPTS IN THE PERIOD	875	00	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

number on each page.

Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amo	ount
12-23-13	BROCKTON POLICE BLACK + BLUES ASSU.	7 COMMERCIAL ST. BROCKTON, MA 01302	DOURTION	50	00
11-17-13	CHARITY GUILD	BROCKTON, MA OLZO	MOTTHUOD	150	00
11-5-13	MARGARET CRUISE	92 wenthrop sti brockton, ma 02301	REIMBURSEMENT- CAMPAIGN WORKER REFRESHMENTS	40	38
11-9-13	PETTI'S MARKET	BROCKTON, MA 01301	VOLUNTEER REFRESHMENTS	300	00
10-28-13	PROSPECT HILL CO.	12 FIELD ST. BROCKTOW, MA 02301	PRINTING	1500	00
11-6-13	PROSPECT HILL CO.	12 FIELD ST. BROCKTOW, MA 02301	PRINTING, MAILING	2031	25
11-30-13	THAT'S TASTY	28 BIGNEY AVE. BROCKTON, MA OLZOI	VULLINTEER APPRECIATION	750	00
12-30-13	THORNY LEA GOLF CLUB	159 TORREY ST. BRECKTON, MA 02301	TICKETS- INALGURATION	224	00
11-14-13	TUTTO BENE	BROCKTON, MA 01301	REFRESHMENTS- CAMPAIGO WORKERS	533	00
				II .	
	•				
	2				
		Line 12: I	Expenditures over \$50	5578	63
			Expenditures \$50 and under*		
F	Enter on page 1, line 4		TOTAL EXPENDITURES	5578	63

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		Line 15:	In-kind over \$50	
		Line 16:	In-kind \$50 and under	
44.02-1	Enter on page 1, line 6	Line 17:	Total In-kind	-0-

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	21		•	
]	Enter on page 1, line 7	Line 18: OUTSTANDING LIA	ABILITIES (ALL)	-0-

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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